



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

**\*BIBDATASHEET\***

CONFIRMATION NO. 3616

Bib Data Sheet

SERIAL NUMBER 10/069,674	FILING DATE 02/22/2002  RULE	CLASS 600	GROUP ART UNIT 3736	ATTORNEY DOCKET NO. 00438-02
-----------------------------	---------------------------------------	--------------	------------------------	------------------------------------

## APPLICANTS

Boris P. Kovatchev, Amherst, VA;

J. Randall Moorman, Charlottesville, VA;

William L. Clarke, Charlottesville, VA; Martin Straume, Charlottesville, VA;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/US00/22886 08/21/2000  
 which claims benefit of 60/150,243 08/23/1999

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## \*\* SMALL ENTITY \*\*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged  Allowance Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>	VA	14	20	6

## ADDRESS

34444

UNIVERSITY OF VIRGINIA PATENT FOUNDATION

1224 WEST MAIN STREET, SUITE 1-110

CHARLOTTESVILLE, VA

22903

## TITLE

Method and apparatus for predicting the risk of hypoglycemia

FILING FEE  RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )

481

☐ Other \_\_\_\_\_

☐ Credit